



"People
helping people
help
themselves"

MICHAEL R. PENCE., GOVERNOR
STATE OF INDIANA

Division of Aging

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To: Indiana Nursing Facilities

From: Faith Laird, Director
Division of Aging

Date: 7/2/13

RE: e450B Process Update

As you are aware the new e450B submission process became effective state wide February 1, 2013. As with any new process, there are implementation challenges. What we did not anticipate was the volume of submissions which must be returned due to being incomplete or having incorrect information, e.g. resident's Medicaid identification number (RID), nursing facility provider number, admission date, missing documentation, etc. This requires the nursing facility to retransmit the required documentation/clarification or initiate a new e450B in order for the Division of Aging to issue a determination.

The Division of Aging, though not required by law or policy, established a self imposed thirty-five (35) day processing time frame. As indicated during the training sessions conducted in January, it was our intention to review and issue determinations within thirty-five (35) days of submission. Unfortunately, due to the challenges listed above, we have been unable to meet that time frame. To address the back log of transmitted cases, the Division of Aging has re-assigned staff to assist in the review process and we will continue to make revisions to reduce the backlog. It is our intention that once the back log of previously transmitted cases are processed and recent submissions are reviewed, the Division of Aging will establish a processing time frame.

Attached is a summary of the common errors identified during the e450B review process.

Please feel free to contact Becky Koors, Assistant Director of Long Term Care Operations, with any question you may have concerning the e450B process. Becky can be reached at 317-232-4355 or by email at Rebecca.Koors@fssa.in.gov.

Thank you in advance for your cooperation, hard work, and dedication to serving our residents.

Cc: Nursing Facility trade associations
Karen Filler, Division of Aging
Becky Koors, Division of Aging



e450B: Common Errors/Issues

General issues:

- Untimely submissions (i.e.-request for continued PAS expired prior to submission; resident became Medicaid eligible 6-8 or more months prior to submission)
- NF failure to respond to request for additional information, must retransmit requested information within two (2) weeks of request
- NF failure to provide all requested information (i.e.-request for NF to attach the 4b and include the credentials for who signed the e450B; the NF attaches the 4b but failed to address the credentials issue)
- 4b must be relevant / related to the admission date
- NF fails to accurately track the report id for each resident which leads to the NF contacting DA requesting who the report id belongs to
- NF fails to download the dispositioned e450B (within 30 days of the decision) or fails to pick up the email from DA requesting additional information or the rejection notice
- NFs fail to complete the download process and then must contact DA for authorization to re-download the decision
- The e450B web page contains the assessment type status summary which identifies what date DA is reviewing per assessment type; NFs continue to call / email requesting the status for their residents even with that information readily available to them on line.
- The NF must review the 4b to determine if an e450B is required (i.e.-if the 4b states a state authorized computer generated SADE will be issued by DA to the NF, then an e450B may not be required).
- NF staff turnover often causes delays in processing the e450B process within the facility; the NF must provide sufficient training to new and current staff in order to avoid delays.
- BOMs have voiced concerns to DA staff regarding communication issues between the office staff and the nursing staff; this can cause unnecessary delays in the required documentation being submitted to DA for review/processing.

e450B section:

- Incorrect assessment type selected (i.e.-request for continued stay is selected when long term has already been authorized, the correct assessment type should have been marked as nursing facility transfer)
- Incorrect SSN/RID/LPI
- Incorrect admit date/date of birth
- Missing information: credentials or date of signature

- Missing discharge date (d/c = to the community/home)
- Form is not legible

Clinical summary section:

- Inconsistent admit dates listed (admit date on the e450B is different than what is listed in the clinical summary or indicated on the 4b)
- Clinical summary failed to include the applicable discharge date
- Clinical summary/narrative is not in line or consistent with what is indicated on the e450B
- Clinical summary is not completed/detailed; refer to sample summaries available on line
- Clinical summary is missing the author's signature or is not dated
- 4b is not attached
- Waiver letter or freedom of choice document is not attached